UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YOR		
UNITED STATES OF AMERICA	: . <u>WAI</u>	VER OF RIGHT TO BE SENT AT CRIMINAL
-V-	•	CEEDING
VALDEZ SIMMONS, Defendant	: : : : 20 - (CR- 294 (PKC)
Check Proceeding that Applies		
X Entry of Plea of Guilty		
I am aware that I have been charg my attorney about those charges. certain charges. I understand I ha Southern District of New York to me as I do. I am also aware that pandemic has interfered with trave discussed these issues with my at court that I willingly give up my rof guilty. By signing this docume any right I might have to have my following conditions are met. I way and to be able to speak on my behaprivately with my attorney at any	I have decided that I wish we a right to appear before enter my plea of guilty and the public health emergence and restricted access to the torney. By signing this doright to appear in person be not, I also wish to advise the y attorney next to me as I and my attorney to be able to alf during the proceeding. I	th to enter a plea of guilty to a judge in a courtroom in the d to have my attorney beside by created by the COVID-19 ne federal courthouse. I have becoment, I wish to advise the fore the judge to enter a plea court that I willingly give up enter my plea so long as the participate in the proceeding also want the ability to speak
Valdez Simmons Print Defendant's Name	_/S/	2/18/21
Print Defendant's Name	Signature of Defendant	Date
Sentence		

I understand that I have a right to appear before a judge in a courtroom in the Southern District of New York at the time of my sentence and to speak directly in that courtroom to the judge who will sentence me. I am also aware that the public health emergency created by the COVID-19 pandemic has interfered with travel and restricted access to the federal courthouse. I do not wish to wait until the end of this emergency to be sentenced. I have discussed these issues with my attorney and willingly give up my right to be present, at the time my sentence is imposed, in the courtroom with my attorney and the judge who will impose that sentence. By signing this document, I wish to advise the court that I willingly give up my right to appear in a courtroom in the Southern District of New York for my

sentencing proceeding as well as my right to have my attorney next to me at the time of sentencing on the following conditions. I want my attorney to be able to participate in the

	o speak on my behalf at the proceeding. ith my attorney at any time during the	
Print Defendant's Name	Signature of Defendant	Date
client, my client's rights to attend a waiver, and this waiver and conse	my obligation to discuss with my client nd participate in the criminal proceeding ent form. I affirm that my client knowled with my client and me both participated.	gs encompassed by this wingly and voluntarily
Robert M. Baum	Robert M. Baum	2/18/2021
Print Defense Counsel's Name	Signature of Defense Counsel	Date
	to discuss these issues with the defendent entirety, to the defendant before the de	
Print Defense Counsel's Name	Signature of Defense Counsel	Date
Accepted:		
	T. Kivin Castit	
Hon. P. Kevin Castel		2/22/2021
Print Judge's Name	Signature of Judge	Date